

REGISTRATION FORM

Please Print!



The *ACE Reading Club* is a community-based youth reading program that strives to inspire and encourage students to read and enjoy books, develop a life long interest in reading, and explore a basic skill for success. The Club is voluntary and open to all children in grades K thru 12 who attend school or live in Greenbelt. The Club visits local schools and hosts several special programs and events throughout the year to promote the motto “reading is fun!” The *ACE Reading Club* offers many unique programs and activities for youth in Greenbelt, Maryland. For more information on this program please visit our website at www.greenbeltmd.gov/ace.

Instructions: Please complete the entire form. Failure to include all information may delay important announcements including events, contests, and special programs, as well as notification about your student’s participation. Beginning in June 2006, you will no longer need to register every year; you only need to register with the Club ONCE. For more information about the ACE Reading Club please contact the Program Coordinator at 301-345-6660, or email lmurray@greenbeltmd.gov.

Send your registration form to:
ACE Reading Club, Greenbelt CARES, 25 Crescent Road, Greenbelt, MD 20770
or fax: 301-441-8248

Date: _____

STUDENT’S NAME:		PHONE NUMBER:	
PARENT/ GUARDIAN’S NAME:		STUDENT’S BIRTHDATE:	
STREET ADDRESS:			APT #:
CITY:		ZIP CODE:	
SCHOOL NAME:		GRADE:	
EMAIL (For ACE Reading Club use only):			
EMERGENCY CONTACT NAME:		EMERGENCY CONTACT PHONE:	
Who may pick up your child from ACE Reading Club events (They must be able to provide photo ID at time of pick up)?			

Parent or Guardian: Please read and sign below.

I give the City of Greenbelt, Greenbelt CARES, and the Greenbelt Advisory Committee on Education (ACE), permission to use the book reviews (printed or taped), photos of, or any other ACE project by _____ in the local newspaper, on the City of Greenbelt website, the local cable channel, and other venues hosting ACE Reading Club events and activities.

Student’s Name (please print)

Parent’s Signature

Date

FOR OFFICE USE ONLY: Initial Participation	<input type="checkbox"/> Summer Club Meetings	<input type="checkbox"/> Lit Magazine/ Create-a-Book	<input type="checkbox"/> Other:
	<input type="checkbox"/> Book Buddies	<input type="checkbox"/> Book-It Programs	
	<input type="checkbox"/> Parent/ Child Discussions	<input type="checkbox"/> Pen Pals Project	
	<input type="checkbox"/> Teen Discussions	<input type="checkbox"/> School Club Meeting	